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November 29, 2019

The Honorable Brad Wenstrup
Rural and Underserved Communities Health
Task Force
House Committee on Ways and Means
2419 Rayburn House Office Building
Washington, DC 20515

The Honorable Danny Davis
Rural and Underserved Communities Health
Task Force
House Committee on Ways and Means
2159 Rayburn House Office Building
Washington, DC 20515

The Honorable Jodey Arrington
Rural and Underserved Communities Health
Task Force
House Committee on Ways and Means
1029 Longworth House Office Building
Washington, DC 20515

The Honorable Terri Sewell
Rural and Underserved Communities Health
Task Force
House Committee on Ways and Means
2201 Longworth House Office Building
Washington, DC 20515

Dear Co-Chairs of the Rural and Underserved Communities Health Task Force,

Thank you for the opportunity to respond to the request for information (RFI) on priority topics that affect health status and outcomes in rural and underserved areas. We appreciate all your work to address inequalities in these communities and your leadership on the Task Force.

At the University of Cincinnati, we are on the forefront of educating and training the next generation of health providers to work in rural, urban, and underserved areas, helping our future health professionals have broad exposure to different types of technology, communities, and factors impacting patients. Furthermore, throughout the University, research is taking place that addresses the societal factors that can impact health. For example, through mechanisms like the Center for Clinical and Translational Science and Training at UC, we are looking at ways to collaborate and work together on addressing social determinants of health. At the College of Medicine, we have the Urban Health Project, which connects medical students through internships with social organizations, helping students to understand the communities they may one day serve, and the social determinants underserved populations experience. At the College of Nursing we are on the leading efforts to train nursing students in the use technology and transforming the learning experience. In fact, overall, UC is in the process of designing a telehealth certificate program that is designed for physicians, nurses, allied health

professionals, information technology personnel and administrators. This can have a substantial impact on the ability to improve care for populations, including urban, rural, and underserved populations.

As a leader in health professions training, we would like to address question 2 and 6:

Question 2: What successful models show a demonstrable, positive impact on health outcomes within rural or underserved communities, for example initiatives that address: a) social determinants of health (particularly transportation, housing instability, food insecurity); b) multiple chronic conditions; c) broadband access; or d) the use of telehealth/telemedicine/telemonitoring?

At UC we have a tele-psychiatry program in which we are exposing students to telehealth during their clinical experience. For example, as part of our Post-Master's Psychiatric Mental Health Nurse Practitioner program, we prepare nurses to provide effective care for patients with complex psychiatric and physical health needs. As part of this program we are exposing nurses in the program to telehealth and how to use it to meet the mental and behavioral health needs in the United States. Our program is growing quickly, and our graduates are meeting a huge need by increasing access to services and decreasing wait times for getting into the mental health system. This type of model can be successful to ensure we have the workforce to expand the use of telemedicine in to underserved communities.

Question 6: What successful models show a demonstrable, positive impact on addressing workforce shortages in rural and underserved areas? What makes these models successful?

UC is on the forefront of using technology to transform the learning experience, which can also be the key to addressing providers' needs in underserved communities. We work collaboratively across UC to prepare an interprofessional workforce that can utilize telehealth and their skills in the real-world to address the needs of underserved populations. This includes our state-of-the-art simulation lab where students engage with innovative technologies to practice knowledge, skills and behavior in a variety of patient scenarios and settings. This ensures students are prepared to for real-world telehealth to reach patients where they need their care.

What makes our model of training unique, is that we are exposing students to telehealth before they enter the field, rather than after, which impacts our student's ability to familiarize themselves and use telehealth in several ways, including addressing social determinants. For example, through our collaboration with Maple Knoll Village, a nonprofit continuing-care retirement community, students are exposed to training that

helps them learn to use telehealth while also addressing factors that impact health. Through these interactions students can drive a telehealth robot into a patient's home, and not only have a medical interaction, but they can use the robot to remotely look in a patients refrigerator and assess nutrition needs, or examine the patients home environment to help the patient make health decisions that can impact their health.

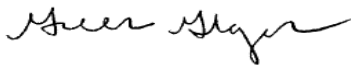
In addition, we have found that early exposure in medical training through programs like AHEC or the clerkships we have throughout Ohio successfully meet workforce needs in underserved communities.

In general, we hope the Task Force will consider providing support for health professions schools that train the next generation of health professionals and providers. It is critical to support innovation in training and encourage students to use technology to provide care in underserved areas and to address social determinants of health in practice.

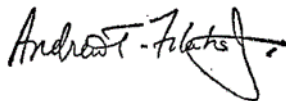
Thank you again for this opportunity to comment, and your efforts to address health inequalities in the United States.

If you have any questions please do not hesitate to reach out to us, or UC's D.C. government relations representative, Julie Rose, at julie@lewis-burke.com.

Sincerely,



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